

County: Trempealeau
 ARCADIA NURSING HOME
 464 SOUTH ST. JOSEPH AVENUE

ARCADIA 54612 Phone: (608) 323-3341
 Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? Yes
 Number of Beds Set Up and Staffed (12/31/01): 75
 Total Licensed Bed Capacity (12/31/01): 75
 Number of Residents on 12/31/01: 73

Facility ID: 8430

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Ownership: Nonprofit Church
 Highest Level License: Skilled
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 74

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		23.3
Supp. Home Care-Personal Care	No					1 - 4 Years		46.6
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	4.1	More Than 4 Years		30.1
Day Services	No	Mental Illness (Org./Psy)	42.5	65 - 74	1.4			-----
Respite Care	No	Mental Illness (Other)	1.4	75 - 84	28.8			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	56.2	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	9.6	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	16.4	65 & Over	95.9	-----		
Transportation	No	Cerebrovascular	15.1		-----	RNs		4.1
Referral Service	Yes	Diabetes	2.7	Sex	%	LPNs		13.7
Other Services	No	Respiratory	4.1		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	17.8	Male	30.1	Aides, & Orderlies		
Mentally Ill	No		-----	Female	69.9			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

	Medi care (Title 18)			Medi cal d (Title 19)			Other		Pri vate Pay			Fami ly Care			Managed Care					
Level of Care	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	Total Resi - dents	% Of All
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	3	100.0	276	54	90.0	95	0	0.0	0	10	100.0	130	0	0.0	0	0	0.0	0	67	91.8
Intermediate	---	---	---	6	10.0	78	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	6	8.2
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	3	100.0		60	100.0		0	0.0		10	100.0		0	0.0		0	0.0		73	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	13.3	Daily Living (ADL)	Independent			
Private Home/With Home Health	3.3	Bathing	12.3	67.1	20.5	73
Other Nursing Homes	13.3	Dressing	12.3	67.1	20.5	73
Acute Care Hospitals	20.0	Transferring	24.7	54.8	20.5	73
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	31.5	47.9	20.5	73
Rehabilitation Hospitals	3.3	Eating	80.8	2.7	16.4	73
Other Locations	46.7	*****				
Total Number of Admissions	30	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	13.7	Receiving Respiratory Care		1.4
Private Home/No Home Health	19.4	Occ/Freq. Incontinent of Bladder	30.1	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	6.5	Occ/Freq. Incontinent of Bowel	24.7	Receiving Suctioning		0.0
Other Nursing Homes	3.2			Receiving Ostomy Care		0.0
Acute Care Hospitals	0.0	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	11.0	Receiving Mechanically Altered Diets		11.0
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care		Other Resident Characteristics		
Deaths	71.0	With Pressure Sores	4.1	Have Advance Directives		100.0
Total Number of Discharges		With Rashes	0.0	Medications		
(Including Deaths)	31			Receiving Psychoactive Drugs		63.0

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities

	This Facility	Other Hospital-Based Facilities		All Facilities	
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	98.7	88.1	1.12	84.6	1.17
Current Residents from In-County	82.2	83.9	0.98	77.0	1.07
Admissions from In-County, Still Residing	46.7	14.8	3.15	20.8	2.24
Admissions/Average Daily Census	40.5	202.6	0.20	128.9	0.31
Discharges/Average Daily Census	41.9	203.2	0.21	130.0	0.32
Discharges To Private Residence/Average Daily Census	10.8	106.2	0.10	52.8	0.20
Residents Receiving Skilled Care	91.8	92.9	0.99	85.3	1.08
Residents Aged 65 and Older	95.9	91.2	1.05	87.5	1.10
Title 19 (Medicaid) Funded Residents	82.2	66.3	1.24	68.7	1.20
Private Pay Funded Residents	13.7	22.9	0.60	22.0	0.62
Developmentally Disabled Residents	0.0	1.6	0.00	7.6	0.00
Mentally Ill Residents	43.8	31.3	1.40	33.8	1.30
General Medical Service Residents	17.8	20.4	0.87	19.4	0.92
Impaired ADL (Mean)*	44.1	49.9	0.88	49.3	0.90
Psychological Problems	63.0	53.6	1.18	51.9	1.21
Nursing Care Required (Mean)*	2.1	7.9	0.26	7.3	0.28